Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 1 of 51

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Writ	e the name that is on	Michele	
		r government-issued ure identification (for	First name	First name
	exa	mple, your driver's	Katherine	
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Thomas	
		itification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you nun Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-5957	
	(,		

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 2 of 51

Debtor 1 Michele Katherine Thomas

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	215 LeJeune Avenue, Apt. 1S	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Will	
		County	County
а		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Entered 09/25/17 17:11:41 Desc Main Page 3 of 51 Doc 1 Filed 09/25/17 Case 17-28652

Document Case number (if known) Debtor 1 Michele Katherine Thomas

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Cha	apter 7				
		☐ Cha	apter 11				
		☐ Cha	apter 12				
		☐ Cha	apter 13				
8.	How you will pay the fee		about how yo	u may pay. Typically, if you are attorney is submitting your pay	paying the fee yo	ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	
					you choose this option, sign and attach the Application for Individuals to Pay		
			request tha	e in Installments (Official Form t my fee be waived (You may	request this optio	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line tha	
		a	applies to you	ır family size and you are unabl	e to pay the fee i	n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	□ No.	Go to I	ne 12.			
	residence?	■ Yes	. Has yo	ur landlord obtained an evictior	judgment agains	st you and do you want to stay in your residence?	
			•	No. Go to line 12.			
				Yes Fill out Initial Statement A	hout an Eviction	Judgment Against You (Form 101A) and file it with this	

Debtor 1	Michele Katherine Thomas	Document	Page 4 of 51	Case number (if known)	
					

ar	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	iness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code				
	it to this petition.		Check	the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrupt Code.				
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any		Trazar do	<u></u>	, report, macrosses miniodiate rationals.			
14.	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?				
					Number, Street, City, State & Zip Code			

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Page 5 of 51 Document

Debtor 1 Michele Katherine Thomas

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 51 Case number (if known) Debtor 1 Michele Katherine Thomas Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michele Katherine Thomas Signature of Debtor 2 **Michele Katherine Thomas**

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on September 21, 2017

MM / DD / YYYY

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 7 of 51

Debtor 1 Michele Katherine Thomas Page 7 01 51

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Andrew J. Draus		Date	September 21, 2017	
Signature of Attorney for	r Debtor		MM / DD / YYYY	
Andrew J. Draus				
Printed name				
Law Office of Andre	ew J. Draus, PC			
915 S Main Street				
Lombard, IL 60148				
Number, Street, City, State & Z	P Code			
Contact phone 630-705	-1700	Email address	lawdraus@aol.com	
6206866				
Bar number & State				

		1700.111116		
Fill in this infor	mation to identify your	case:		
Debtor 1	Michele Katherin	e Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

chedule A/B: Property (Official Form 106A/B) a. Copy line 55, Total real estate, from Schedule A/B	\$ Your lia	0.00 3,075.00 3,075.00
Summarize Your Liabilities Chedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ Your lia	3,075.00
Summarize Your Liabilities chedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your lia	
chedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)		abilities
		abilities
		t you owe
a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
chedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,858.87
Your total liabilities	\$	41,858.87
Summarize Your Income and Expenses	ļ	
chedule I: Your Income (Official Form 106I) opy your combined monthly income from line 12 of Schedule I	\$	2,171.21
chedule J: Your Expenses (Official Form 106J) opy your monthly expenses from line 22c of Schedule J	\$	2,325.00
Answer These Questions for Administrative and Statistical Records		
re you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
Yes hat kind of debt do you have?		
	Summarize Your Income and Expenses Medule I: Your Income (Official Form 106I) Proy your combined monthly income from line 12 of Schedule I	Summarize Your Income and Expenses Separate Sep

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Entered 09/25/17 17:11:41 Desc Main Case 17-28652 Doc 1 Filed 09/25/17 Page 9 of 51
Case number (if known) Document

Debtor 1 Michele Katherine Thomas

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 3,726.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

			Document	Page 10 of 51			
Fill in t	this inform	ation to identify your	case and this filing:				
Debtor	1	Michele Katherin	e Thomas				
		First Name	Middle Name	Last Name			
Debtor (Spouse,		First Name	Middle Name	Last Name			
1	•						
United	States Ban	ikruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case n	umber			_			Check if this is an
							amended filing
Offic	<u>ial For</u>	m 106A/B					
Sch	edule	A/B: Prop	erty				12/15
			e items. List an asset only once. It				
informat		space is needed, attach	ate as possible. If two married peop a separate sheet to this form. On t				
Part 1:	Describe E	Each Residence, Building	g, Land, or Other Real Estate You C	own or Have an Interest In			
1. Do yo	ou own or ha	ave any legal or equitabl	e interest in any residence, buildin	g, land, or similar propertv?			
`			•				
_	o. Go to Part	- -					
⊔ Ye	es. vvnere is	the property?					
Part 2:	Describe Y	our Vehicles					
Do you	own leas	e or have legal or eg	uitable interest in any vehicles	whether they are registe	ered or not? Include an	, vehicl	es you own that
			le, also report it on Schedule G:				
3 Cars	vans tru	cks tractors sport in	tility vehicles, motorcycles				
o. Cars	s, vans, nu	cks, tractors, sport u	unity vernicles, motorcycles				
)						
■ Ye	es						
	•	NL			Do not deduct secure	d claime	or exemptions Put
	_	Chevy	Who has an interest in t	the property? Check one	the amount of any sec	ured cla	aims on <i>Schedule D:</i>
	- WIOGCI.	Cavalier 995	Debtor 1 only		Creditors Who Have (Claims S	Secured by Property.
	Year: <u>1</u> Approximate		Debtor 2 only J Debtor 1 and Debtor 2 Debtor 1	2 only	Current value of the entire property?		urrent value of the ortion you own?
	Other inform		At least one of the del	•	onine property:	,	
					\$1,000.00	,	\$1,000.00
			(see instructions)	nunity property	φ1,000.00		\$1,000.00
4 Wate	ororaft aire	eraft motor homos A	TVs and other recreational vel	victos othor vohiclos and	d accessories		
			onal watercraft, fishing vessels, s				
_							
■ No	0						
□ Ye	es						
5 Add	l the dollar	value of the portion	you own for all of your entries	from Part 2 including an	y entries for		
			. Write that number here				\$1,000.00
		our Personal and Hous					
Do you	ı own or h	ave any legal or equit	able interest in any of the follo	wing items?			rent value of the ion you own?
						Do r	not deduct secured
						clain	ns or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Document Page 11 of 51 Debtor 1 Case number (if known) **Michele Katherine Thomas** Yes. Describe..... \$250.00 Household Goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ■ No ☐ Yes. Describe..... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$300.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ Yes..... Official Form 106A/B Schedule A/B: Property page 2

Case 17-28652

Doc 1

Filed 09/25/17

Entered 09/25/17 17:11:41

Desc Main

Case 17-28652 Entered 09/25/17 17:11:41 Desc Main Filed 09/25/17 Doc 1 Page 12 of 51
Case number (if known) Document

Debtor 1 **Michele Katherine Thomas**

			Cash	\$50.00
17	institutions.		ounts; certificates of deposit; shares in credit unions, brokerage ho with the same institution, list each.	ouses, and other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking	BMO Harris Bankchecking account	\$700.00
18	Examples: Bond funds,	or publicly traded stocks investment accounts with bro	kerage firms, money market accounts	
	■ No □ Yes	Institution or issuer r	name:	
19	joint venture	ock and interests in incorpo	orated and unincorporated businesses, including an interest	in an LLC, partnership, and
	■ No □ Yes. Give specific infe	ormation about them Name of entity:	 % of ownership:	
20	Negotiable instruments	include personal checks, casl	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
	■ No □ Yes. Give specific info	ormation about them Issuer name:		
21	. Retirement or pension Examples: Interests in I		03(b), thrift savings accounts, or other pension or profit-sharing pl	ans
	Yes. List each accoun	t separately. Type of account:	Institution name:	
22		d deposits you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companie	es, or others
	Yes		Institution name or individual:	
			Apartment - security deposit	\$825.00
23	_ `	or a periodic payment of mone	ry to you, either for life or for a number of years)	
	■ No □ Yes Iss	suer name and description.		
24			ualified ABLE program, or under a qualified state tuition prog	ram.
	■ No □ YesIns	stitution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25	— 100		ther than anything listed in line 1), and rights or powers exerc	cicable for your benefit
20	■ No	, ,	ther than anything listed in line 1), and rights of powers exert	isable for your beliefit
	☐ Yes. Give specific info	ormation about them		
26			d other intellectual property ds from royalties and licensing agreements	
	■ No ☐ Yes. Give specific info	ormation about them		

		Case	17-2865	2 Doc 1	Filed 09/25/17 Document	Entered 09/25/17 17:11:41 Page 13 of 51	Desc Main		
D	ebtor 1	Michele	Katherine	Thomas	Document	Case number (if known)			
27.	Exam _i ■ No	<i>ples:</i> Buildir	ng permits, ex	ner general inta cclusive licenses n about them	ingibles s, cooperative associatio	n holdings, liquor licenses, professional license	es		
М	onev or	property o	wed to you?	•			Current value of the		
	·	,	·				portion you own? Do not deduct secured claims or exemptions.		
28.	Tax re	funds owe	d to you						
	_	Give specif	fic informatior	n about them, in	cluding whether you alre	ady filed the returns and the tax years			
29.	Exam _i ■ No		ue or lump su		usal support, child supp	ort, maintenance, divorce settlement, property	settlement		
30.	 Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No 								
	☐ Yes.	Give speci	ific informatio	n					
31.	Exam _i ■ No	<i>ples:</i> Health	•	r life insurance;	· ·	HSA); credit, homeowner's, or renter's insuran	nce		
	□ res.	name the i		ompany name:	oolicy and list its value.	Beneficiary:	Surrender or refund value:		
32.	If you somed	are the ben one has die	eficiary of a li	iving trust, expe	n someone who has die ct proceeds from a life ir	ed surance policy, or are currently entitled to rece	eive property because		
33.	Exam _i ■ No	ples: Accide		nent disputes, in	you have filed a lawsu surance claims, or right	it or made a demand for payment s to sue			
34.	■ No	_	and unliquid		f every nature, includin	g counterclaims of the debtor and rights to	set off claims		
35.	■ No		ets you did i	not already list					
36	6. Add 1	the dollar v	alue of all of	f your entries f		ny entries for pages you have attached	\$1,575.00		
Pa	rt 5: De	escribe Any E	Business-Rela	ted Property You	ı Own or Have an Interest	In. List any real estate in Part 1.			
					in any business-related p	-			
		o to Part 6.	, .g v		,	•			
	☐ Yes. (Go to line 38.							

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Page 14 of 51
Case number (if known) Document Debtor 1 **Michele Katherine Thomas** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ No Yes. Give specific information....... \$100.00 Books, pictures, CD's music and CD's movie \$100.00 Clothes - work & casual 54. Add the dollar value of all of your entries from Part 7. Write that number here \$200.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$1,000.00 57. Part 3: Total personal and household items, line 15 \$300.00 Part 4: Total financial assets, line 36 \$1,575.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$200.00

\$3,075.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,075.00

\$3,075.00

		17(7(1)))		<u> </u>	
Fill in this inform	mation to identify your	case:			
Debtor 1	Michele Katherin	e Thomas			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Chec
,					amei
					anich

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the I	Property	You	Claim a	s Exemp	ıt
---------	----------	-------	----------	-----	---------	---------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$250.00		\$250.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$50.00		\$50.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$700.00		\$700.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$250.00 \$50.00	\$1,000.00	Copy the value from Schedule A/B \$1,000.00 \$1,000.00 \$1,000.00 \$250.00 \$250.00 \$250.00 \$250.00 \$50.00 \$50.00 \$50.00 \$50.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$50.00 \$50.00 \$50.00 \$700.00 \$700.00 \$700.00

Entered 09/25/17 17:11:41 Document Page 16 of 51 **Michele Katherine Thomas** Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Books, pictures, CD's music and 735 ILCS 5/12-1001(b) \$100.00 \$100.00 CD's movie Line from Schedule A/B: 53.1 100% of fair market value, up to any applicable statutory limit Clothes - work & casual 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 53.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Doc 1

Case 17-28652

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Filed 09/25/17

- No
- Yes

Desc Main

		1212111		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Michele Katherin	e Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this
				amende

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

		Docum	ent Page 18	3 of 51		
Fill in this in	formation to identify your	case:				
Debtor 1	Michele Katherine	Thomas				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS			
Case number					□ Ch	eck if this is an
					_	nended filing
Official Fo	orm 106E/F					
Schedule	E/F: Creditors W	ho Have Unsed	cured Claims			12/15
Schedule G: Ex Schedule D: Cr eft. Attach the name and case	contracts or unexpired leases tecutory Contracts and Unexp editors Who Have Claims Seci Continuation Page to this pag number (if known).	ired Leases (Official Forn ured by Property. If more e. If you have no informa	n 106G). Do not include space is needed, copy t	any creditors with partially se he Part you need, fill it out, nu	cured claims t imber the entr	hat are listed in ies in the boxes on the
	editors have priority unsecure	d claims against you?				
■ No. Go	to Part 2.					
☐ Yes.						
	st All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any cre	editors have nonpriority unsec	ured claims against you?	,			
☐ No. You	u have nothing to report in this pa	art. Submit this form to the	court with your other sche	dules.		
Yes.						
unsecured	your nonpriority unsecured cla claim, list the creditor separately reditor holds a particular claim, li	for each claim. For each o	laim listed, identify what t	ype of claim it is. Do not list clair	ns already inclu	ided in Part 1. If more
r art 2.						Total claim
ADV	ENTIST BOLINGBROOF	(
4.1 HOS	PITAL		its of account number	1487	_	\$4,973.90
500	iority Creditor's Name Remington Blvd.	When was	s the debt incurred?	5/30/15-6/1/15		
Numb	ngbrook, IL 60440 er Street City State Zlp Code incurred the debt? Check one.	As of the	date you file, the claim i	s: Check all that apply		
■ De	ebtor 1 only	☐ Conting	gent			
□ De	ebtor 2 only	☐ Unliqui	dated			
□ De	ebtor 1 and Debtor 2 only	☐ Dispute	ed			
☐ At	least one of the debtors and and	other Type of N	ONPRIORITY unsecured	l claim:		
□ cr	neck if this claim is for a comr	nunity	t loans			
debt Is the	claim subject to offset?		tions arising out of a sepa priority claims	ration agreement or divorce that	you did not	
■ No)	☐ Debts	to pension or profit-sharin	g plans, and other similar debts		
☐ Ye	es	Other.	Specify			

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 19 of 51
Case number (if know)

Michele Katherine I nomas		Case number (if know)	
AllianceOne Receivables Mgmnt IN	Last 4 digits of account number		Unknown
Nonpriority Creditor's Name 4850 E Street Rd, Ste 300 Feasterville Trevose, PA 19053	When was the debt incurred?	1/17	
Number Street City State Zlp Code	As of the date you file, the claim is	S: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		
Barclays Bank Delaware	Last 4 digits of account number	1331	\$3,112.00
Nonpriority Creditor's Name P.O. Box 8803 Wilmington DE 10800	When was the debt incurred?	1/09 to 1/17	
Wilmington, DE 19899 Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.	•	, , , , , , , , , , , , , , , , , , , ,	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Car p	ourchases	
BMO Harris Bank	Last 4 digits of account number	5860	\$6,019.00
Nonpriority Creditor's Name P. O. Box 1111 Modicon, WI 52716	When was the debt incurred?	7/2/13 to 8/16	
Madison, WI 53716 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
Yes	Other Specify credit card	purchases	

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 20 of 51

Debtor 1 Michele Katherine Thomas Case number (if know) 4.5 \$3,350.13 Capital One Last 4 digits of account number 0337 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? 7/6/05 to 5/1/16 Carol Stream, IL 60197-6492 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify credit card purchases ☐ Yes 4.6 **Capital One** Last 4 digits of account number 4110 \$3,773.00 Nonpriority Creditor's Name P.O. Box 30285 When was the debt incurred? 12/06 to 7/17 Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No **Credit card purchases** ☐ Yes Other, Specify 4.7 Capital One Bank Last 4 digits of account number \$4,224.00 1545 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? 10/10 to 5/16 Carol Stream, IL 60197-6492 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify credit card purchases

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 21 of 51
Case number (if know)

	Michele Ratherme Homas			
4.8	Citi Bank/Sears Nonpriority Creditor's Name	Last 4 digits of account number	2763	\$1,808.91
	P.O. Box 78051 Phoenix, AZ 85062-8051	When was the debt incurred?	12/21/14 to 8/21/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other Specify Credit card	purchases	
4.9	DuPage Pathology Assoc	Last 4 digits of account number	0459	\$410.00
	Nonpriority Creditor's Name 520 E 22nd Street	When we the debt incomed?	E/20/4E to C/4/4E	
	Lombard, IL 60148-6110	When was the debt incurred?	5/30/15 to 6/1/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical Bil	<u> </u>	
4.1	Heart Care Centers of Illinois	Last 4 digits of account number	1122	\$575.00
	Nonpriority Creditor's Name			
	P. O. Box 766 Bedford Park, IL 60499-0766	When was the debt incurred?	5/30/15 to 6/1/15	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other, Specify Medical bil	ls	

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 22 of 51

Debtor 1 Michele Katherine Thomas Case number (if know) 4.1 Illinois Emergency Medical Spec 0800 \$45.68 Last 4 digits of account number Nonpriority Creditor's Name **Adventist Bolingbrook Hospital** When was the debt incurred? 5/30/15 500 Remington Blvd Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical bills 4.1 Juniper Credit Card 8522 Unknown Last 4 digits of account number 2 Nonpriority Creditor's Name P. O. Box 60517 When was the debt incurred? City of Industry, CA 91716-0517 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.1 Medical Business Bureau 0270 \$248.00 3 Last 4 digits of account number Nonpriority Creditor's Name 1460 Renaissance Drive When was the debt incurred? 2/17 to 7/17 Park Ridge, IL 60068-7219 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collections

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 23 of 51

Debtor 1 Michele Katherine Thomas Case number (if know) 4.1 Merrick Bank 2220 \$2,684.00 Last 4 digits of account number 4 Nonpriority Creditor's Name 10705 S Jordan When was the debt incurred? 7/13 to 12/16 Suite 200 South Jordan, UT 84095 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 4.1 Northstar Credit Union 3280 \$3,560.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P. O. Box 790408 10/12 to 7/17 When was the debt incurred? Saint Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card puchases ☐ Yes 4.1 **Permier Internal Medicine GRP** 3015 \$352.45 6 Last 4 digits of account number Nonpriority Creditor's Name 2910 Harlem Avenue When was the debt incurred? 5/30/15-6/1/15 Riverside, IL 60546 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical bills

Page 24 of 51 Case number (if know) Document Debtor 1 Michele Katherine Thomas

4.1 7	SEARS MASTERCARD	Last 4 digits of account number	2143	\$2,572.64			
	Nonpriority Creditor's Name P.O. BOX 6282	When was the debt incurred?	11/15/2014 to 12/2016				
	Sioux Falls, SD 57117-6282 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Credit card	purchases				
4.1	SILVER CROSS HOSPITAL	Last 4 digits of account number	7780	\$1,032.53			
	Nonpriority Creditor's Name 1900 Silver Cross Road	When was the debt incurred?	5/4/16				
	New Lenox, IL 60451-9508 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
4.1	Southwest Infectious Disease Assoc	Last 4 digits of account number	8879	\$73.63			
	Nonpriority Creditor's Name	_					
	1051 Essington Road, Ste 200 Joliet, IL 60435	When was the debt incurred?	4/25/16-5/2/16				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?						
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Medical bill	ls				
		- Onioi. Opoony					

Document Page 25 of 51 Case number (if know) Debtor 1 Michele Katherine Thomas 4.2 Suburban Radiologists 0712 \$754.00 Last 4 digits of account number 0 Nonpriority Creditor's Name 1446 Momentum Place 5/30/15-6/1/15 When was the debt incurred? Chicago, IL 60689-5314 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical bills** Other. Specify 4.2 SYNCB/Discount Tire 3429 \$2,290.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 965036 When was the debt incurred? 2/15 to 6/17 Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 5102 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Blitt & Gaines** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number 2763

Name and Address **Creditors Discount & Audit Co**

415 E Main Street Streator, IL 61364-0213 On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 26 of 51

Debtor 1 Michele Katherine Thomas		Case number (if know)			
	Last 4 digits of account number	6880			
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?			
DEPENDON COLLECTION SE	Line <u>4.20</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
P.O. BOX 4983 OAKBROOK, IL 60522-4983		■ Part 2: Creditors with Nonpriority Unsecured Claims			
OANDROOK, IE 00322-4303	Last 4 digits of account number	8182			
Name and Address	On which entry in Part 1 or Part 2 d	· <u> </u>			
EM Strategies	Line <u>4.13</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
	Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Malcolm Gerald & Assoc	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
332 S Michigan Avenue Suite 600		Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago, IL 60604-1193	Last 4 digits of account number	2334			
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?				
Merchants Credit Guide Co	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
233 West Jackson Blvd. #700 Chicago, IL 60606		Part 2: Creditors with Nonpriority Unsecured Claims			
5.11.02g6, 12 00000	Last 4 digits of account number	0542			
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?			
Vision Financial Service	Line <u>4.18</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims			
P. O. Box 1768		Part 2: Creditors with Nonpriority Unsecured Claims			

Part 4: Add the Amounts for Each Type of Unsecured Claim

La Porte, IN 46352-1768

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	•		•	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 41,858.87
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 41,858.87

Last 4 digits of account number

		I A A A A A A A A A A A A A A A A A A A		
Fill in this infor	mation to identify your	case:		
Debtor 1	Michele Katherin	e Thomas		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Jaroslaw Palenik	month-to-month apartment lease
2.2	Secure Storage Lockport, IL	month-to-month storage unit

		Docume	ent Page 28 o	of 51	
Fill in thi	s information to identify your	r case:			
Debtor 1	Michele Katherir	o Thomas			
Debiori	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ormod Or	atoo Barittaptoy Court for the.				
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	lebtors			12/15
2. Wi Arizo	thin the last 8 years, have yo na, California, Idaho, Louisiana b. Go to line 3. es. Did your spouse, former spouteners, list all of your codeb e 2 again as a codebtor only	u lived in a community pr a, Nevada, New Mexico, Pu buse, or legal equivalent live otors. Do not include your if that person is a guaran	operty state or territo erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make	ry? (Community proper, hington, and Wisconsin.) r if your spouse is filin sure you have listed t	
	Column 2.	,,		,	,
	Column 1: Your codebtor	ZID Codo			editor to whom you owe the debt
	Name, Number, Street, City, State and 2	ZIP Code		Check all schedul	es that apply:
3.1				☐ Schedule D, lir	ne
0	Name			□ Schedule E/F,	
				☐ Schedule G, lir	
	North an Otrost				
	Number Street City	State	ZIP Code		
	,				
				_	
3.2				D Schedule D, lir	
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street				
	City	State	ZIP Code		

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 29 of 51

	in this information to otor 1		ase: nerine Thomas								
Del	otor 2	- Microcic Itali	ierine monius			_					
	ouse, if filing)	atau Caunt fan tha	NODTHEDN DICTOR								
	•	otcy Court for the	: NORTHERN DISTRIC	TOF ILLINOIS		-					
	se number nown)							t if this is: amende			
							□ A:	suppleme	ent showi	ng postpetition	
\sim	· · · · · · · · · · · · · · · · · · ·	4001					13	income	as of the	following date:	
	fficial Form						MI	M / DD/ Y	YYY		
	chedule I:										12/15
sup spo atta	plying correct info use. If you are sep ch a separate she	ormation. If you parated and you	sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition	ng jointly, and your th you, do not inclu	spouse i ide inforr	s livi natio	ng with y n about	you, incl your spo	ude infor ouse. If m	mation about nore space is	your needed,
1.	Fill in your empl	loyment		Debtor 1				Dahtar (filing analyse	
	information. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or			_				Debtor 2 or non-filing spouse ☐ Employed			
			Employment status	■ Employed				□ Not e	-		
				☐ Not employed				I NOT 6	mpioyeu		
			Occupation	Administrative	Project	Eng	<u>-</u>				
	self-employed wo		Employer's name	Randstad US Staffing							
	Occupation may or homemaker, if		Employer's address	3250 Lacey Roa Suite 220 Downers Grove							
			How long employed the	here? 3 years	3						
Par	rt 2: Give De	etails About Mor	thly Income					_			
Esti spou	mate monthly incurse unless you are	ome as of the da separated.	ate you file this form. If you	, 3	•	emplo	yers for t	hat perso	on on the	lines below. If	J
	Datas di			of and all and the			For Deb	tor 1		ebtor 2 or ling spouse	
2.			ry, and commissions (be calculate what the monthl		2.	\$_	2,9	981.33	\$	N/A	
3.	Estimate and lis	st monthly overti	me pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	e 2 + line 3.		4.	\$	2,98	1.33	\$	N/A	

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 30 of 51

Debtor 1 Michele Katherine Thomas Case number (if known)											
					Fo	r Debtor 1			Debtor i-filing s		
	Сор	y line 4 here	4.		\$	2,981	.33	\$	-illing s	N/A	<u> </u>
5.	List	all payroll deductions:									
0.	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	672	2.49	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$_		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	١.	\$		0.00	\$		N/A	
	5e.	Insurance	5e) .	\$		7.63	\$		N/A	
	5f.	Domestic support obligations	5f.		\$	C	0.00	\$		N/A	<u>\</u>
	5g.	Union dues	5g	١.	\$	(0.00	\$		N/A	<u>\</u>
	5h.	Other deductions. Specify:	5h	1.+	\$_	(0.00	+ \$		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	810).12	\$		N/A	<u>\</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,171	.21	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1	\$	·	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	; <u>.</u>	\$		0.00	\$		N/A	_
	8d.	Unemployment compensation	8d	l.	\$	C	0.00	\$		N/A	<u>\</u>
	8e.	Social Security	8e) .	\$	C	0.00	\$		N/A	<u>\</u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$_ \$		0.00	\$		N/A N/A	
	8h.	Other monthly income. Specify:	8h		\$-		0.00	· —		N/A	
			_	Г				_			<u>-</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	C	0.00	\$_		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,171.21	1 ¢		N/A	= \$	2.171.21
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		2,171.21			11//]	2,171.21
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe							e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							. 12.	\$	2,171.21
									1	Comb	ined ly income
13.	Do y	you expect an increase or decrease within the year after you file this form. No.	?								
	_	Yes Explain:									

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 31 of 51

FIII	I in this information to identify your case:							
Deb	btor 1 Michele Katherine Thomas		Che	ck if this is:				
				An amended filing				
	btor 2			A supplement show 13 expenses as of the	ving postpetition chapter			
(Spo	pouse, if filing)			rs expenses as or	the following date.			
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		MM / DD / YYYY					
l	se number							
(If kı	known)							
Of	Official Form 106J							
Sc	chedule J: Your Expenses				12/15			
Be info	e as complete and accurate as possible. If two married people are filing formation. If more space is needed, attach another sheet to this form. Imber (if known). Answer every question.							
	ort 1: Describe Your Household							
1.	Is this a joint case?							
	■ No. Go to line 2.							
	☐ Yes. Does Debtor 2 live in a separate household?							
	□ No							
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for S	Separate Housel	hold of Deb	otor 2.				
2.	Do you have dependents? ■ No							
۷.								
		ependent's relation ebtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state the dependents names.				□ No □ Yes			
	шерепиеть нашез. —				□ Yes □ No			
					☐ Yes			
					□ No			
					□ Yes			
					□ No			
					☐ Yes			
3.	Do your expenses include ■ No							
	expenses of people other than							
	yourself and your dependents?							
	art 2: Estimate Your Ongoing Monthly Expenses							
exp	stimate your expenses as of your bankruptcy filing date unless you a penses as of a date after the bankruptcy is filed. If this is a supplement plicable date.							
	clude expenses paid for with non-cash government assistance if you e value of such assistance and have included it on Schedule I: Your I							
(Off	fficial Form 106l.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. Include	lo firet mortanao						
4.	payments and any rent for the ground or lot.	le ilist mortgage	4. \$		825.00			
	If not included in line 4:							
	4a. Real estate taxes		4a. S	.	0.00			
	4b. Property, homeowner's, or renter's insurance		4b. §	5	0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00			
_	4d. Homeowner's association or condominium dues	auditula aas	4d. S		0.00			
5.	Additional mortgage payments for your residence, such as home en	quity ioans	5. \$	p	0.00			

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 32 of 51

Debtor 1 Michele K	atherine Thomas	Case num	nber (if known)	
6. Utilities:				
	neat, natural gas	6a.	\$	50.00
•	er, garbage collection	6b.		0.00
	cell phone, Internet, satellite, and cable services	6c.		110.00
6d. Other. Spec		6d.	·	0.00
7. Food and housek	•	ou. 7.	·	400.00
	ildren's education costs	8.		
		9.	·	0.00
	y, and dry cleaning		· ·	50.00
Personal care pro		10.		20.00
1. Medical and dent	•	11.	\$	150.00
2. Transportation. If Do not include car	nclude gas, maintenance, bus or train fare.	12.	\$	400.00
	ubs, recreation, newspapers, magazines, and books	13.	·	20.00
	butions and religious donations	14.	· ·	40.00
i. Charitable contril 5. Insurance.	buttons and religious donations	14.	Ψ	40.00
	urance deducted from your pay or included in lines 4 or 20.			
15a. Life insuran		15a.	\$	32.00
15b. Health insur		15b.		0.00
		15c.		
15c. Vehicle insu				75.00
15d. Other insura		15d.	Φ	0.00
	ude taxes deducted from your pay or included in lines 4 or 20). 16.	¢	0.00
Specify: 7. Installment or lea	novmente.		\$	0.00
7. installment or lea 17a. Car paymen		17a.	¢	0.00
17b. Car paymen		17b.		0.00
17c. Other. Spec		17c.	·	0.00
17d. Other. Spec		17d.	\$	0.00
	f alimony, maintenance, and support that you did not rep		\$	0.00
	our pay on line 5, Schedule I, Your Income (Official Form you make to support others who do not live with you.	1061).	\$	
Specify:	you make to support others who do not live with you.	19.	*	0.00
	ty expenses not included in lines 4 or 5 of this form or or			
20a. Mortgages		20a.		0.00
			·	
20b. Real estate		20b.		0.00
	omeowner's, or renter's insurance	20c.	·	0.00
	e, repair, and upkeep expenses	20d.		50.00
20e. Homeowner	's association or condominium dues	20e.	\$	0.00
Other: Specify:	Storage	21.	+\$	103.00
2. Calculate your m	onthly expenses			
22a. Add lines 4 th	• •		\$	2 225 00
	•)6 I 2	\$	2,325.00
* *	(monthly expenses for Debtor 2), if any, from Official Form 10	JOJ-2	·	
22c. Add line 22a	and 22b. The result is your monthly expenses.		\$	2,325.00
3. Calculate your m	onthly net income.			
•	2 (your combined monthly income) from Schedule I.	23a.	\$	2,171.21
• • •	nonthly expenses from line 22c above.	23b.		2,325.00
200. Copy your n	noming expenses from the 220 above.	230.	Ψ	2,323.00
23c Subtract voi	ur monthly expenses from your monthly income.			
	s your monthly net income.	23c.	\$	-153.79
. The recent to	- , · · · · · · · · · · · · · · · ·		<u> </u>	
	n increase or decrease in your expenses within the year a			
For example, do you	expect to finish paying for your car loan within the year or do you expe			or decrease because o
	rms of your mortgage?			
■ No.				
☐ Yes. [Explain here:			

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 33 of 51

Fill in this inform	mation to identify your	case:			
Debtor 1	Michele Katherin	e Thomas			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
	ion About a		Debtor's Sc		12/15
ii two marrieu pe	sopie are ming togethe	i, both are equally resp	onsible for supplying con	ect information.	
obtaining money		n connection with a ba			nent, concealing property, or , or imprisonment for up to 20
Sign	n Below				
Did you pa	y or agree to pay some	eone who is NOT an atte	orney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankr	uptcy Petition Preparer's Notice,
	· —			Declaration, a	and Signature (Official Form 119)
•	Ity of perjury, I declare e true and correct.	that I have read the su	mmary and schedules filed	d with this declaration	and
X /s/ Mic	hele Katherine Thon	nas	X		
Michel	e Katherine Thomas	<u> </u>	Signature of I	Debtor 2	

Date

Signature of Debtor 1

Date September 21, 2017

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 34 of 51

Eill	in this inform	ation to identify you	r 0000			
	otor 1	ation to identify you Michele Katherir				
	7.01	First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Cas	se number					
(if kn					-	Check if this is an amended filing
	ficial For atement		Affairs for Individ	duals Filing for B	ankruptcy	4/10
info num	rmation. If mo	ore space is needed,). Answer every que	ble. If two married people a attach a separate sheet to stion. rital Status and Where You	this form. On the top of any		
1.	What is your	current marital statu	ıs?			
	□ Married■ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	■ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	668 Aspen Romeoville		From-To: 4/00 to 7/15	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
3. state	■ No □ Yes. Mal	es include Árizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Ne nedule H: Your Codebtors (Of r Income	vada, New Mexico, Puerto R		
4.	Fill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part	time activities.	endar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$27,734.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Page 35 of 51
Case number (if known) Document Debtor 1 Michele Katherine Thomas

					Debtor 1		Debtor 2			
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)	
			dar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$37,528.00	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business		☐ Operating a l	ousiness		
			dar year be December		■ Wages, commissions, bonuses, tips	\$38,866.00	missions,	18,		
					☐ Operating a business		☐ Operating a l	ousiness		
	and winr	other nings. each s	public bene If you are fil	fit payments; ing a joint cas :he gross inco	er that income is taxable. Ex- pensions; rental income; inte e and you have income that me from each source separa	rest; dividends; money colle you received together, list it	cted from lawsuits; only once under De that you listed in lin	royalties; and btor 1.		
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inco Describe below.		Gross income (before deductions and exclusions)	
			/ 1 of curre filed for bai	nt year until nkruptcy:		\$0.00				
Par	t 3:	List	t Certain Pa	yments You	Made Before You Filed for	Bankruptcy				
6.	Are	eithe i No.	Neither D	ebtor 1 nor D	s debts primarily consume ebtor 2 has primarily consi personal, family, or househo	u <mark>mer debts.</mark> Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an	
				90 days befo	re you filed for bankruptcy, d	id you pay any creditor a tot	al of \$6,425* or mor	e?		
			□ No.	Go to line 7		'.l 1-1-1 - (ha tatal amandon	
				paid that cre not include	ach creditor to whom you pa editor. Do not include paymen payments to an attorney for t on 4/01/19 and every 3 year	nts for domestic support obli his bankruptcy case.	gations, such as ch	ild support a	nd alimony. Also, do	
		Yes.			r both have primarily consure you filed for bankruptcy, d		al of \$600 or more?			
			■ No.	Go to line 7						
			□ Yes	include pay	ach creditor to whom you pa ments for domestic support o this bankruptcy case.					
	Cre	editor'	s Name an	d Address	Dates of payme	ent Total amount	Amount you	Was this p	payment for	

Page 36 of 51
Case number (if known) Document Debtor 1 Michele Katherine Thomas

7.	Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.									
		D-1(T-1-1	A	D	41.1				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No		ments or transfer a	any property on a	ccount of a d	ebt that benefited an				
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name				
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures								
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case				
	Case number Citibank, N.A v. Michele Thomas Small Claims Twelfth Judicial Cir County 14 W. Jefferson Joliet				ircuit, Will ☐ Pending ☐ On appeal ☐ Concluded					
	Capital One Bank v. Michele Thomas 17 SC 5102	Small claims	Twelfth Judicia County	al Circuit, Will	■ Pending □ On appeal □ Concluded					
	Capital One Bank v. Michele Thomas 17 SC 5102	Small Claims	Twelfth Judicia	al Circuit	■ Pending □ On appeal □ Concluded					
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, f	oreclosed, garnis	hed, attache	d, seized, or levied?				
	Yes. Fill in the information below.	Describe the Property		Date		Value of the				
	Creditor Name and Address	Describe the Property Explain what happened		Date		Value of the property				
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details.	otcy, did any creditor, incl ause you owed a debt?	uding a bank or fir							
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount				
				tuitoi						

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Page 37 of 51 Case number (if known) Document Debtor 1 Michele Katherine Thomas 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.

Address

Person Who Was Paid

Description and value of any property

transferred

Amount of

payment

Date payment

made

or transfer was

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Page 38 of 51
Case number (if known) Document

Debtor 1 **Michele Katherine Thomas**

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial aff de as security (such as	airs? the granting of a s		•	
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer		Describe any p payments rece paid in exchan	eived or debts	Date transfer was made
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No ☐ Yes. Fill in the details.		ny property to a s	self-settled trust or	[,] similar device of	f which you are a
	Name of trust	Description and	value of the prop	erty transferred		Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Depos	it Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ ■ No □ Yes. Fill in the details.	other financial accou	ınts; certificates	of deposit; shares	,	, ,
		Last 4 digits of account number	Type of accourant instrument	nt or Date ac closed, moved, transfer	or	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No	ear before you filed fo	r bankruptcy, an	y safe deposit box	or other deposite	ory for securities,
	☐ Yes. Fill in the details. Name of Financial Institution	Who else had ac		Describe the conte	ents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)	Street, City,			have it?
22.	Have you stored property in a storage unit or ☐ No ☐ Yes. Fill in the details.	place other than you	r home within 1 y	ear before you file	ed for bankruptcy	?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the conte	ents	Do you still have it?
	Secure Storage Lockport, IL	n/a		Used pictures, b furniture.	ooks,	□ No ■ Yes
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that som for someone. No Yes. Fill in the details.	eone else owns? Inc	lude any property	you borrowed fro	om, are storing fo	r, or hold in trust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the prop	erty	Value

Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Case 17-28652 Doc 1 Page 39 of 51
Case number (if known) Document

Debtor 1 **Michele Katherine Thomas**

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

	to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.					
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?					
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admir	nistrative proceeding under any enviro	onmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t 11: Give Details About Your Business or Co	onnections to Any Business				
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have any	of the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership					
	☐ An officer, director, or managing executive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	No. None of the above applies. Go to Pa	rt 12.				
	☐ Yes. Check all that apply above and fill in					
	Address	Describe the nature of the business	Employer Identification number Do not include Social Security I			
		•	Dates business existed			

Page 40 of 51 Case number (if known) Debtor 1 **Michele Katherine Thomas** 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michele Katherine Thomas Signature of Debtor 2 Michele Katherine Thomas Signature of Debtor 1 Date September 21, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Entered 09/25/17 17:11:41

Case 17-28652

Doc 1

Filed 09/25/17

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Document

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 41 of 51

Debtor 1	Michele Katherine	Thomas		
	First Name	Middle Name	Last Name	—
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Bankru	uptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				_
(if known)				☐ Check if this is an amended filing
you have leased ou must file this fo whichever on the form	is earlier, unless th n	nd the lease has no rithin 30 days after le court extends the	ot expired. you file your bankruptcy petition or by the time for cause. You must also send copie th are equally responsible for supplying co	es to the creditors and lessors you lis
Sign and a			needed attach a congrete cheet to this for	rm. On the top of any additional page
Be as complete and write your	name and case nur	nber (if known).	needed, attach a separate sheet to this for	
Be as complete and write your Part 1: List Your	name and case nur	nber (if known).		
Be as complete and write your	name and case nur Creditors Who Have that you listed in Pa	nber (if known).	: Creditors Who Have Claims Secured by P	roperty (Official Form 106D), fill in th
e as complete and write your Part 1: List Your For any creditors information below	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D		rty that Did you claim the prope
Part 1: List Your For any creditors information below Identify the creditors	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D	Creditors Who Have Claims Secured by P What do you intend to do with the prope secures a debt?	rty that Did you claim the prope as exempt on Schedule
Be as complete and write your Part 1: List Your For any creditors information below Identify the creditor	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D	: Creditors Who Have Claims Secured by P What do you intend to do with the prope secures a debt?	rty that Did you claim the prope
Be as complete and write your Part 1: List Your For any creditors information below Identify the creditor Creditor's name:	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D	Creditors Who Have Claims Secured by P What do you intend to do with the prope secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	rty that Did you claim the prope as exempt on Schedule
Be as complete and write your Part 1: List Your I. For any creditors information below Identify the creditor Creditor's name: Description of	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D	Creditors Who Have Claims Secured by P What do you intend to do with the prope secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	rty that Did you claim the prope as exempt on Schedule
Be as complete and write your Part 1: List Your For any creditors information below Identify the creditor Creditor's name:	name and case nur Creditors Who Have that you listed in Pa	nber (if known). e Secured Claims art 1 of Schedule D	Creditors Who Have Claims Secured by P What do you intend to do with the prope secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	rty that Did you claim the prope as exempt on Schedule

Official Form 108

Creditor's

name:

property

Creditor's

name:

property

Description of

securing debt:

Description of

securing debt:

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

 $\hfill\square$ Retain the property and redeem it.

☐ Retain the property and enter into a

Reaffirmation Agreement.

☐ Surrender the property.

☐ Retain the property and [explain]:

☐ Retain the property and redeem it.

 \square Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

□ No

☐ Yes

☐ No

Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 42 of 51

Debtor 1	Michele Katherine Thomas	Case number (if kno	own)
name		Detain the property and redoom it	□Yes
Harrio	•	Retain the property and redeem it.	□ res
Descr	ription of	☐ Retain the property and enter into a Reaffirmation Agreement.	
prope	·	Retain the property and [explain]:	
	ing debt:		
Part 2:	List Your Unexpired Personal Property Le		
in the inf	formation below. Do not list real estate lease	listed in Schedule G: Executory Contracts and Unexples. Unexpired leases are leases that are still in effect ase if the trustee does not assume it. 11 U.S.C. § 365	the lease period has not yet ended.
	e your unexpired personal property leases		Will the lease be assumed?
Describ	e your unexpired personal property leases		Will the lease se assumed.
Lessor's			□ No
Descript Property	ion of leased		-
riopeity	·		☐ Yes
Lessor's	name:		□ No
	ion of leased		_
Property	<i>/</i> .		☐ Yes
Lessor's			□ No
Descript Property	ion of leased		
riopeity	·		☐ Yes
Lessor's			□ No
Descript Property	ion of leased		
Гторсту	•		☐ Yes
Lessor's			□ No
Property	ion of leased /:		☐ Yes
Lessor's Descript	name: ion of leased		□ No
Property	r:		☐ Yes
Lessor's	name:		□ No
	ion of leased		_
Property	<i>/</i> .		☐ Yes
Part 3:	Sign Below		
	enalty of perjury, I declare that I have indicat	ed my intention about any property of my estate that	secures a debt and any personal
X /s/	Michele Katherine Thomas	X	
	chele Katherine Thomas	Signature of Debtor 2	
Sig	nature of Debtor 1	- -	
Da	te September 21, 2017	Date	
- 4			

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-28652 Doc 1 Filed 09/25/17 Entered 09/25/17 17:11:41 Desc Main Document Page 47 of 51

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Michele Katherine Thomas		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR DI	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy.	, or agreed to be paid	to me, for services rende	ered or to
				0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are mem	bers and associates of my	y law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited d. [Other provisions as needed] 	tement of affairs and plan which	n may be required;		tcy;
	Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho	ons as needed; preparation			
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.	ee does not include the following schargeability actions, jud	g service: icial lien avoidanc	es, relief from stay ad	ctions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an pankruptcy proceeding.	ny agreement or arrangement for	payment to me for i	representation of the debt	or(s) in
5	September 21, 2017	/s/ Andrew J. Dra	ius		
_	Date	Andrew J. Draus			_
		Signature of Attorne Law Office of An	ey drew J. Draus, PC	;	
		915 S Main Stree	t		
		Lombard, IL 6014 630-705-1700 Fa			
		lawdraus@aol.co			_
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Michele Katherine Thomas		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		Number of C	Creditors:	28		
	The above-named Debtor(s) he (our) knowledge.	ereby verifies that the list of credito	ors is true and	correct to the best of my		
Date:	September 21, 2017	/s/ Michele Katherine Thomas Michele Katherine Thomas Signature of Debtor				

ADVENTIST BOLINGBROOK HOSPITAL 500 Remington Blvd. Bolingbrook, IL 60440

AllianceOne Receivables Mgmnt IN 4850 E Street Rd, Ste 300 Feasterville Trevose, PA 19053

Barclays Bank Delaware P.O. Box 8803 Wilmington, DE 19899

Blitt & Gaines 661 Glenn Ave Wheeling, IL 60090

BMO Harris Bank P. O. Box 1111 Madison, WI 53716

Capital One P.O. Box 6492 Carol Stream, IL 60197-6492

Capital One P.O. Box 30285 Salt Lake City, UT 84130

Capital One Bank P.O. Box 6492 Carol Stream, IL 60197-6492

Citi Bank/Sears P.O. Box 78051 Phoenix, AZ 85062-8051

Creditors Discount & Audit Co 415 E Main Street Streator, IL 61364-0213

DEPENDON COLLECTION SE P.O. BOX 4983 OAKBROOK, IL 60522-4983 DuPage Pathology Assoc 520 E 22nd Street Lombard, IL 60148-6110

EM Strategies

Heart Care Centers of Illinois P. O. Box 766 Bedford Park, IL 60499-0766

Illinois Emergency Medical Spec Adventist Bolingbrook Hospital 500 Remington Blvd Bolingbrook, IL 60440

Juniper Credit Card P. O. Box 60517 City of Industry, CA 91716-0517

Malcolm Gerald & Assoc 332 S Michigan Avenue Suite 600 Chicago, IL 60604-1193

Medical Business Bureau 1460 Renaissance Drive Park Ridge, IL 60068-7219

Merchants Credit Guide Co 233 West Jackson Blvd. #700 Chicago, IL 60606

Merrick Bank 10705 S Jordan Suite 200 South Jordan, UT 84095

Northstar Credit Union P. O. Box 790408 Saint Louis, MO 63166

Permier Internal Medicine GRP 2910 Harlem Avenue Riverside, IL 60546

SEARS MASTERCARD P.O. BOX 6282 Sioux Falls, SD 57117-6282

SILVER CROSS HOSPITAL 1900 Silver Cross Road New Lenox, IL 60451-9508

Southwest Infectious Disease Assoc 1051 Essington Road, Ste 200 Joliet, IL 60435

Suburban Radiologists 1446 Momentum Place Chicago, IL 60689-5314

SYNCB/Discount Tire P.O. Box 965036 Orlando, FL 32896

Vision Financial Service P. O. Box 1768
La Porte, IN 46352-1768